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March 26, 2004

MAR 2 6 2004

To: Assistant Commissioner for Patents	From: Peter A. Nichols 818/493-2323	)FFI(	CIAL
Attention: Examiner K. Schaetzle Art Unit: 3762 TECHNOLOGY CENTER 3700			
Telecopier: 703/872-9306	<b>Telecopier:</b> 818/362-4795		·
RE: Amendment and Response to Restriction Requirement Applic. No. 10/016,225 Filed: 10/19/2001 Docket No. A01P1068	Number of pages being sent:  11 (including cover page)		

PLEASE DELIVER TO EXAMINER SCHAETZLE, ART UNIT 3762. THANK YOU.

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PATENT RECEIVED

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## IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

MAR 2 6 2004

Applicant:

Jeffrey D. Snell

Serial No.:

10/016,225

Examiner:

K. Schaetzle

Filed:

10/19/2001

Art Unit:

3762

Docket No.:

A01P1068

For:

METHOD AND APPARATUS TO BACKUP, UPDATE AND

SHARE DATA AMONG IMPLANTABLE CARDIAC

STIMULATION DEVICE PROGRAMMERS

## TRANSMITTAL OF AMENDMENT AND RESPONSE TO RESTRICTIN REQUIREMENT AND CERTIFICATE OF MAILING

Mail Stop Amendments Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450 Sir:

Submitted herewith for filing are the following documents:

Amendment and Response to Restriction Requirement

Transmittal of Amendment... and Cert. of Mlg.

Associate Power of Attorney

Fee Transmittal

Respectfully submitted,

Date: 3-26-04

Peter A. Nichols, Reg. No. 47,822

Patent Attorney for Applicant

Correspondence Address:

PACESETTER, INC. 15900 Valley View Court Sylmar, CA 91392-9221

818/493-2323

818/362-4795 (fax)

I hereby cartify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office on:

March 26, 2004

PTC/SB/17 (10-03)
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FEE TRANSMITTAL			140/04/				if Known		
I LL HAMBINI IAL		Application Number			<del>"                                     </del>	10/016,225			
for FY 2004		Filing Date				10/19/2001			
Effective 10/01/2003. Patent focs are subject to ennual revision.		First Named Inventor			tor Jeffery	Jeffery D. Snell			
		Examiner Name			K. Scha	K. Schaetzle			
Applicant claims small entity status. See 37 CFR 1.27		Art Unit			3762				
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The Director Is authorized to: (check all that apply)  Charge fee(s) indicated below  Credit any overpayments	1812	2,520	1812	•		•	te reexamination	<b></b>	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920*	Requesting pub Examiner action	lication of SIF	R prior to		
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1201 86 2201 43 Independent claims in excess of 3	180	9 770	2809		Filing a submis (37 CFR 1,129	(a))	•		
1203 290 2203 145 Multiple dependent claim, if not paid	181	770	2810	385	For each additi examined (37 (	onal invention CFR 1.129(b)	n to be )		
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SUBMITTED BY (Complete (if sppliceble))									
Name (Print/Type) Peter A. Nichols			tion No	47.	.822	Telephone	818-493-2323		
and the second of the second o	- 1	(Altome)	v.RDESII			-			

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